



Attny. Dkt. No. 071949-2404

1627
JFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kenneth F. Buechler et al.
Title: HYBRID PHTHALOCYANINE
DERIVATIVES AND THEIR
USES
Appl. No.: 09/776,599
Filing Date: February 1, 2001
Examiner: Jon D. Epperson
Art Unit: 1627

<p>CERTIFICATE OF MAILING</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450, on the date below.</p> <p><u>LIVE GAUTHIER</u> (Printed Name)</p> <p><u><i>Live Gauthier</i></u> (Signature)</p> <p><u>June 10 2004</u> (Date of Deposit)</p>
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RESPONSE TO OFFICE ACTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
Sir:

In response to the Office Action mailed on March 10, 2004, please enter the following amendments and consider the following remarks.

Amendments to the Claims begin on page 2 of this document.

Remarks/Arguments begin on page 5 of this document.

Please amend the application as follows:



Atty. Dkt. No. 071949-2404

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kenneth F. Buechler, et al.

Title: HYBRID PHTHALOCYANINE
DERIVATIVES AND THEIR
USES

Appl. No.: 09/776,599

Filing Date: 2/1/2001

Examiner: Jon D. Epperson

Art Unit: 1639

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AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	16	-	20	=	0	x	\$18.00	=	\$0.00
Independent Claims:	1	-	3	=	0	x	\$86.00	=	\$0.00
First presentation of any Multiple Dependent Claims:						+	\$290.00	=	\$0.00
							CLAIMS FEE TOTAL	=	\$0.00

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

June 10, 2004

By

Barry Wilson

FOLEY & LARDNER LLP
Customer Number: 30542
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Facsimile: (858) 792-6773

Barry S. Wilson
Registration No. 39,431
For
Richard J. Warburg
Registration No. 32,327